

SOLUTION, JAMSHEDPUR  
(LEAVE APPLICATION FORM)

To  
The Leave Granting In charge  
SOLUTION Jamshedpur.

Subject: Application for Leave.

Dear Sir/Madam,  
I am writing formal request for leave from work, as I have made arrangement to ensure that my ongoing Project/Work/Assignment will not hamper and also available in mobile contacts for any kind of urgent talk from the head office. So as per bellow description kindly grant my application.

SL. NO.	DETAILS	DESCRIPTION					
1.	Employee ID						
2.	Employee Name						
4.	Employee Department						
5.	Employee Designation						
6.	Immediate Reporting Authority Name with Designation and Contact No.						
7.	Reason for Leave						
8.	Type of Leave- Evidence attached as per Norms (CL/PL/SL/ML-PL/EL)						
9.	Leave Requested For	From		To		Total Days	
10.	Emergency Contact Name & Number.						

Leave Application Submission Procedure

1. For Sick Leave Soft copy signature not required submit through Web portal- [www.solution.org.in](http://www.solution.org.in)

2. For Sick Leave Take Print after signature send hard copy through messenger/WhatsApp/Email-[adminhr@solution.org.in](mailto:adminhr@solution.org.in)

3. Other than sick leave submit the application to Immediate reporting authority take comments before submission to final granting Authority at least before two working days.

4. More than two days consecutive sick leave send evidence of sick through WhatsApp/Email/Personal Messenger/ Post etc.

Signature With Date

FOR OFFICE USE ONLY

Immediate Reporting Authority Comments  
(Forwarded to Final Granting Authority)

Final Granting Authority Comments with Signature.  
(Granted/Rejected with Reason)

Signature With Date

Leave Record Management (To be entered in Leave register)	Leave Type	Yearly Limit	Remarks	Opening Leave Count	Closing Leave Count-Balance
	EL/PL	18	Policy Matter		
	CL	12			
	SL	12			
	ML	182	1 <sup>st</sup> Two Children Policy Matter		
	CO	00	As Accrued		
	LWP	Policy Matter	Decide By Management		
	BL	03			
	ML	05	One Time when Marriage		

Name and Signature of Record Keeper.

Signature With Date